

SPECIAL JOB ANNOUNCEMENT FOR EMPLOYMENT OPPORTUNITIES FAYETTE COUNTY HUMAN RESOURCES DEPARTMENT

140 Stonewall Ave., Suite 212 Fayetteville, GA 30214 770-460-5730, ext 5418

DEPUTY MARSHAL

FAYETTE COUNTY IS NOT ACCEPTING APPLICATIONS AT THIS TIME.

PLEASE LOOK FOR FUTURE POSTINGS.

Job descriptions are available for review in the Human Resources Office, Monday-Friday, 8:00 am to 5:00 p.m. If you feel you qualify for the above position, you should forward completed Deputy Marshal application packet to the Fayette County Human Resources Department, 140 Stonewall Avenue, Suite 212, Fayetteville, GA 30214 or fax: 770-719-5553.

JOB HOTLINE - 770-460-5730, EXT 5409



FAYETTE COUNTY MARSHAL'S/SAFETY DEPARTMENT

C.L.(Butch) Hall Marshal/Safety Director 140 Stonewall Ave., West Fayetteville, Georgia 30214

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I,, do no	ereby authorize a review of and full disclosure of all records
	t of the Fayette County Safety Department, whether the said
records are of a public, private, or confidentia	ai nature.
educational institutions; financial or credit insor retail credit agencies (including credit represents wherever filed; medical and psychiatri private practitioners, and the U.S. Veteran's including background reports, polygraph reported by or against me; and the records and records	consent for full and complete disclosure of the records of stitutions, the records of loans, the records of commercial ports and/or ratings), and other financial statements and c treatment and/or consultation, including hospitals, clinics, Administration; employment and pre-employment records, orts and charts; efficiency ratings complaints or grievances collections of attorneys at law, or of other counsel, whether se, either criminal or civil, in which I presently have or have
developed directly or indirectly, in whole or in determining my suitability for employment by the I also certify that any person(s) who may f	by a personal history background investigation which is a part, upon this release authorization will be considered in the Fayette County Furnish such information concerning me shall not be held do hereby release said person(s) from any and all liabilitying such information.
A photocopy of this release form will be valid a not contain an original writing of my signatur	as an original thereof, even though the said photocopy does e.
Signature:	SS #:
DATE:	DOB:
PRESENT ADDRESS	
PREVIOUS ADDRESS	
NOTARY	

Fayette County Application For Employment

2004

Job(s) Title Applied For:

FAYETTE COUNTY BOARD OF COMMISSIONERS
140 Stonewall Avenue West
Human Resources Department, Suite 212
Fayetteville, GA 30214
770-460-5730 Ext. 5409
770-719-5553 FAX
Web Site - fayettecountyga.gov

(PRINT ALL INFORMATION)

Date of Application:

Last Name	Middle Name					
Address: Number	S	treet	City	State	Zip Code	
	•		0.1,	0.0.0	p	
Telephone Number(s)	Home	Cell		Work		
Resume attached?					Yes No	
Have you ever been emplo	-	·			Yes No	
Are you prevented from la this country because of Vi	Yes No					
Have you been convicted (Conviction will not necessal f Yes, please explain:	Yes No					
		Edu	cation			
	Name & Address of School Course(s) of Study					
Elementary School						
High School						
Undergraduate College						
Graduate/Professional						
Other (Specify)						

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Descr	ribe any specialized training, skills or	r certifications.
Describ	e any job-related training received ir	n the US military.
Describe any special job	related skills & qualifications obtain	ned from employment experience.
, , ,	•	' '
References		
Name	A daluaca.	Dhana Numban
Name:	Address:	Phone Number:
Name:	Address:	Phone Number:
Name:	Address:	Phone Number:
Note to Applicants: Do not answe	r this question unless you have been	n informed or have read the job description
	e requirements of the job for which	
<u>about th</u>	to requirements of the job for willen	you are apprinted.
Are you comple of morformity of the	wasanahla mannan wilih anadika sa	. Voc
	reasonable manner, with or without	. 169 🖂
a reasonable accommodation, the		No
occupation for which you have app	olied?	No 🗆

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer many discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. I further understand that I will not receive any further communication regarding this application unless I am scheduled for testing or am selected for an interview.

regulations of the employer. I further understand that I will not receive any further application unless I am scheduled for testing or am selected for an interview.	•
Signature of Applicant	
Date:	
Applicants are considered for all positions applied for without regard to race, color, religion, creed, gender, national orig sexual orientation, or any other legally protected status.	in, age, disability, marital or veteran status,

			For	Human Res	ources Departme	ent Use (Only	
Interview:	Yes 🗌	No 🗆		Interview D	Date:			
Interviewer((s):							
Comments:								
Test Scores	if applicab	le):						
Employed:	Ye	s 🗌 No				D	Date of Employment:	
Job Title and	Code:					D	Department:	
Hourly Rate/S	Salary:							
Ву:							Date:	

Employment Experience

List your present or last job. Include any military service assignments. Please include complete addresses, phone numbers, and dates employed.

1	Employer		Dates E <u>From</u>	imployed <u>To</u>	Duties & Responsibilities
	Address				
	Telephone Number(s)				
	Position	Supervisor			
	Reason for Leaving				
2	Employer		Dates E <u>From</u>	imployed <u>To</u>	Duties & Responsibilities
	Address				
	Telephone Number(s)				
	Position	Supervisor			
	Reason for Leaving				
3	Employer		Dates E <u>From</u>	imployed <u>To</u>	Duties & Responsibilities
	Address				
	Telephone Number(s)				
	Position	Supervisor			
	Reason for Leaving				
4	Employer		Dates E <u>From</u>	imployed <u>To</u>	Duties & Responsibilities
	Address				
	Telephone Number(s)				
	Position	Supervisor			
	Reason for Leaving				
5	Employer		Dates E <u>From</u>	imployed <u>To</u>	Duties & Responsibilities
	Address				
	Telephone Number(s)				
	Position	Supervisor			
	Reason for Leaving				



Date:

FAYETTE COUNTY MARSHAL'S OFFICE CRIMINAL/DRIVER HISTORY CONSENT FORM

	3	Department:										
1821 GA.		Reason:			Fire/Emergency Services Reserve/Public Safety							
GA.		10-29C Case #:										
		Approved		Dis-A	Approv	red			Dep	ot. Disc	eretion	
		ette County Marsh tate or local Crim								rmation	n pertai	ning to me, which
NAME:								DC	DB:			
ADDRESS:												
SS#		RACE	S	SEX	Ι	Privers I	License #	#				STATE
Signature:												
Notary Public S	Signature:								Da	ite:		
			C	RIMIN	IAL E	IISTO	RY					
				DRIVE	ER HI	STOR	Y					
	ABLE REC	ORD IN THE NO	CIC INTE		E IDEN		TION I		III) F	OR:		
		lude the possible e. ou desire a search										on files that are not
Reporting Deputy:	- , <i>y</i>		J 2 22		Appı	roving outy:	v - 6 F*	2 322 60 1				